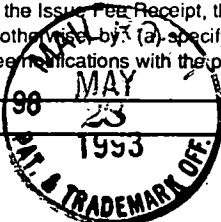


PART B - ISSUE FEE TRANSMITTAL

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advanced orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise by (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

1. CORRESPONDENCE ADDRESS	2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)
3M OFFICE OF INTELLECTUAL PROP. COUNSEL P.O. BOX 33427 ST. PAUL, MN 55133-3427	INVENTOR'S NAME
	Street Address
	City, State and ZIP Code
	CO-INVENTOR'S NAME
	Street Address
	City, State and ZIP Code
	<input type="checkbox"/> Check if additional changes are on reverse side



B. Britton

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
07/215,000	03/03/92	010	HENLEY, D.J.	1995 02/25/95
First Named Applicant	NICK STEVEN H.			

TITLE OF INVENTION
 TOPICAL FORMULATIONS AND TRANSFERAL DELIVERY SYSTEMS CONTAINING
 1-POSSUTYL-1H-IMIDAZOL-5-CARBONYL-4-AMINE

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
11602UGA50	514-293.000	K72	UTILITY	NO	1,170.00	06/02/93

050 MS 06/02/93 07845323	1 142	1,170.00 CK
050 MS 06/02/93 07845323	1 561	30.00 CK

3. Further correspondence to be mailed to the following:

Douglas E. Reedich
 3M Office of Intellectual Property Counsel
 P.O. Box 33427
 St. Paul, MN 55133-3427

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 Gary L. Griswold
 2 Walter N. Kirn
 3 Douglas E. Reedich

DO NOT USE THIS SPACE

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:

Riker Laboratories, Inc.

(2) ADDRESS: (City & State or Country)

St. Paul, Minnesota, U.S.A.

(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION

Delaware

A. ☐ This application is NOT assigned.☒ Assignment previously submitted to the Patent and Trademark Office.☐ Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

6a. The following fees are enclosed:

☒ Issue Fee ☒ Advanced Order - # of Copies 10

6b. The following fees should be charged to:

(Minimum of 10)

DEPOSIT ACCOUNT NUMBER 13-3723

(Enclose Part C)

☐ Issue Fee ☐ Advanced Order - # of Copies☒ Any Deficiencies in Enclosed Fees

(Minimum of 10)

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Signature of party in interest of record)

Douglas E. Reedich

(Date)

Douglas E. Reedich, Reg. No. 33,999

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.